AO 440 (Rev. 03/08) Civil Summons

UNITED STATES DISTRICT COURT

Northern District of California

ARCADIO S. ACUNA)						
Plaintiff)						
V.)	Civil Action No.	CV 07-05423 VRW				
LEA ANN CHRONES							
Defendant	,						
Sum	mons in a Civ	vil Action					
To: William Luger							
(Defendant's name)							
A lawsuit has been filed against you.							
Within D days after service of this sum on the plaintiff an answer to the attached complaint answer or motion must be served on the plaintiff's Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-11	or a motion un attorney, who	der Rule 12 of the Fed se name and address a	eral Rules of Civil Procedure. The are:				
If you fail to do so, judgment by default will be en must file your answer or motion with the court.	tered against y	ou for the relief dema	anded in the complaint. You also				
		R	ichard W. Wieking				
			Name of clerk of court				
Date: April 7, 2008		SIMONE VOLTZ					
		D	enuty clerk's signature				

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF Arcadio S. Acuna					1	COURT CASE NUMBER 3:07-5423 VRW				
DEFENDANT					7	TYPE OF PROCESS				
Lea Ann Chrones et al.					c	Order, Complaint, Summons				
SERVE William Luger	- CDCR - C	Correction	al Officer	C. TO SERVE OR DES	SCRIPTIC	ON OF PROPERTY T	O SEIZE	OR CON	DEMN	
AT ADDRESS (Street				Lode)						
9838 Old Place										
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW						per of process to be d with this Form 285	1			
Arcadio S. Acuna ID# C-43165 Pelican Bay State Prison C-10-119 P.O. Box 7500 Crescent City, CA 95532						per of parties to be				
					Check on U.	for service S.A.				
Signature of Attorney other Originator requesting service on behalf of:					TELEPHO!	NE NUMBER	DATE	DATE		
				DEFENDANT			4/7/0)8		
SPACE BELOW FOR	USE OF	U.S. M.	ARSHAL O	NLY DO NO	T WR	ITE BELOW	THIS	LINE	č.	
					uthorized USMS Deputy or Clerk Date					
han one USM 285 is submitted)		No	No							
hereby certify and return that I have no the individual, company, corporation	ave personally on, etc., at the a	served, address show	have legal evidence on above on the on	e of service, have of the individual, compa	executed a	as shown in "Remarks ation, etc. shown at the	s", the pro- ne address	cess descr inserted b	ibed below.	
I hereby certify and return that I a	m unable to lo	cate the indi	vidual, company, co	orporation, etc. named	above (Se	e remarks below)				
Name and title of individual served (if not shown above)						A person of suitable age and discretion then residing in defendant's usual place of abode				
Address (complete only different than s	shown above)					Date	Time		ar	
					Ì	Signature of U.S. M	arshal or I	Deputy		
Service Fee Total Mileage Chaincluding endeavor				Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)					
					\$0.00					
REMARKS:			-							
PRINTS COPIES: 1. CLERK OF T	THE COURT					PRIOR	EDITIONS		EUCE	

- 2. USMS RECORD
- 3. NOTICE OF SERVICE
- BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 ACKNOWLEDGMENT OF RECEIPT

Form USM-285 Rev. 12/15/80 Automated 01/00 STATE OF CALIFORNIA -- DEPARTMENT OF CORNECTIONS AND REHABILITATION

ARNOLD SCHWARZENEGGER, GOVERNOR

OFFICE OF LEGAL AFFAIRS **LEGAL ACCESS TEAM**

1515 S Street, 95814 P.O. Box 942883 Sacramento, CA 94283-0001



April 10, 2008

Office of the Clerk, U. S. District Court Northern District of California 450 Golden Gate Avenue San Francisco, CA 94102

To Whom It May Concern:

The enclosed documents are being returned to you by the Office of Legal Affairs (OLA), as the OLA is not authorized to accept service of process for the named individuals; Michael Ruff, Everett Fischer, Devan Hawkes, William Luper, and Gary Williams. However, the correct address for proper service of the enclosed documents is as follows:

California Department of Corrections and Rehabilitation Office of Correctional Safety 2880 Sunrise Blvd., Suite 130 Rancho Cordova, CA 95742 Attention: Everett Fischer Senior Special Agent

If you have any questions, please contact me at (916) 341-6962.

Sincerely,

Aurelia Lucero

Associate Governmental Program Analyst

Office of Legal Affairs

Enclosures